



# **Let's Get Down to Business: Your Guide to Sexual Health**

# Executive Summary

Hi Falcons! Welcome to your comprehensive sexual health booklet.

The United States has spent many years and billions of dollars on reinforcing abstinence until marriage only education in schools. However, research has shown that abstinence only education does not meet the goal of reducing unintended pregnancies or sexually transmitted infections in adolescents. It is more likely to leave adolescents unprepared to navigate their sexual health as adults.<sup>1</sup>

It is of the utmost importance to the Centers for Health, Counseling, and Wellbeing, that Bentley students have access to medically accurate, inclusive, and positive sexual health information so that students can make informed decisions about their sexual healthcare. We want to remove the fear mongering, the shame, the misinformation, and the stigma, and just provide you with the facts.

The Bentley community is made up of people from all over the world and raised with diverse cultural values, beliefs, and attitudes. We recognize that not everyone has had the same access to information or opportunities to talk about sexual health with their family members or peers prior to arriving at Bentley and we want to do our part to bridge those gaps. That is exactly why this booklet was created! **Whether you are currently sexually active, have never had sex before, or are not interested in sex at all, this booklet has information that will pertain to everyone.**

Consider this booklet to be a living document, one that will be periodically revised so that it contains the most up to date information. We also want it to be a collaborative piece so that it remains relevant to you and your needs. Let us know about any content you feel is missing and any unanswered questions [here](#). If you have questions that are more specific to your experiences, please feel free to contact the Centers for Health, Counseling, and Wellbeing at [thrive@bentley.edu](mailto:thrive@bentley.edu) or review the resources in the back of the booklet. You can also follow us on Instagram [@bentley\\_health](#) for even more sexual health content.

Happy Falcing!

The Community Wellbeing and Health Promotion team

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# Definitions

There are a lot of sexual health related definitions that are common but can mean different things to different communities. So, for the purpose of this booklet, this is how we are defining and utilizing the following terms.<sup>2</sup> For even more sexual health definitions, check out [the Planned Parenthood Glossary](#).

**Abstinence** – abstaining from some or all forms of sexual activity (vaginal, oral, and anal sex) with another person. Abstinence can mean different things to different people. Learn more [here](#).

**Consent** – a clear, active, and affirmative permission to act. The person who initiates sexual activity is responsible for obtaining the other person’s consent for that activity each and every time. Consent can never be assumed or implied, and the existence of any kind of relationship does not imply consent. Any sexual act without consent is sexual assault. Learn more about Consent later in this booklet or review this [video](#).

**Gender identity** – a person’s internal sense of being and how they would define themselves. Gender identity is not always related to a person’s sex assigned at birth or adheres to traditional “male” or “female” binary labels. Learn more [here](#).

**Intersex** – someone who is born with a combination of chromosomes, reproductive and sexual anatomy that would not be categorized as strictly assigned female at birth (AFAB) or assigned male at birth (AMAB). Being intersex is natural and not a medical anomaly. It also does not dictate a person’s gender identity. Learn more [here](#).

**Masturbation** – touching or stimulating one’s own body or genitals for sexual pleasure

**Mutual Masturbation** – masturbating in the presence of someone else without engaging in sexual activity with one another.

**Orgasm** – the peak of sexual arousal after stimulation to your genitals and other sensitive areas on your body that typically provide a pleasurable feeling. Orgasms are also known as climaxing, cumming, or the “big O”.

**Sex** – the act of vaginal, anal, digital penetration or oral stimulation with a partner/s. It can also refer to being AFAB, intersex, or AMAB based on external sex and reproductive organs, like a vulva or penis.

**Sexual Orientation** – the identities of a person that someone is romantically or sexually attracted too. This can include but is not limited to being gay, lesbian, straight, bisexual, asexual, and more.

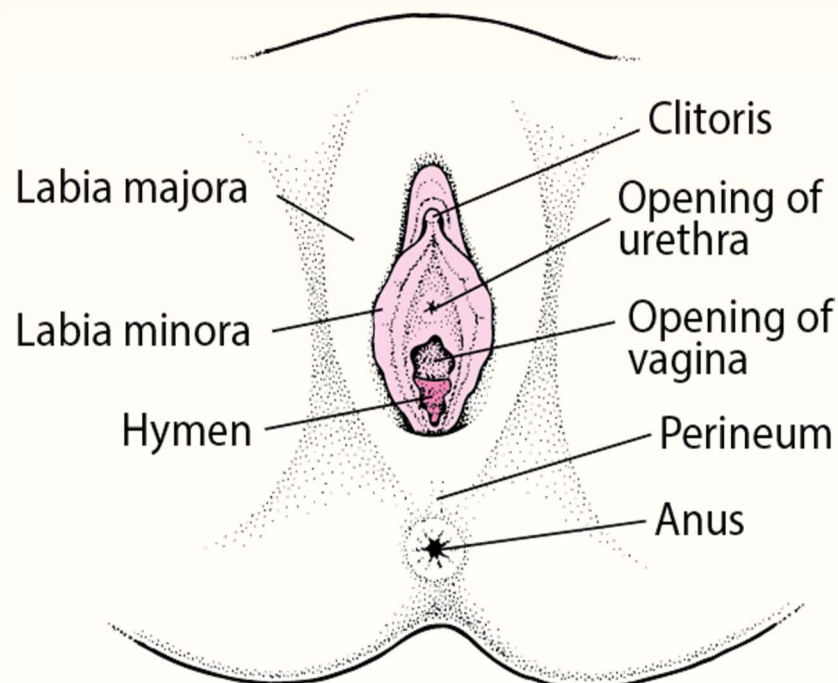
# Anatomy

There are many body parts and essential functions that make up your reproductive and sexual anatomy. Some terms like vagina or penis are examples of sexual anatomy terms that you know very well. Whereas your perineum or vas deferens might not be as familiar. Our sexual anatomy consists of both internal and external parts, and comes in all shapes, colors, and sizes. As we learned in the Definitions section, our sex assigned at birth is based off our sexual anatomy. However, our sexual anatomy is not an indicator of our gender identity or sexual orientation. Also, some may choose to proceed with gender affirming surgery or care that realigns their sexual anatomy with their gender identity. It is important to our overall sexual wellbeing to be familiar with the different parts that make up our individual anatomy, and the functions associated with it.

## **Vulva Anatomy<sup>2-3</sup>**

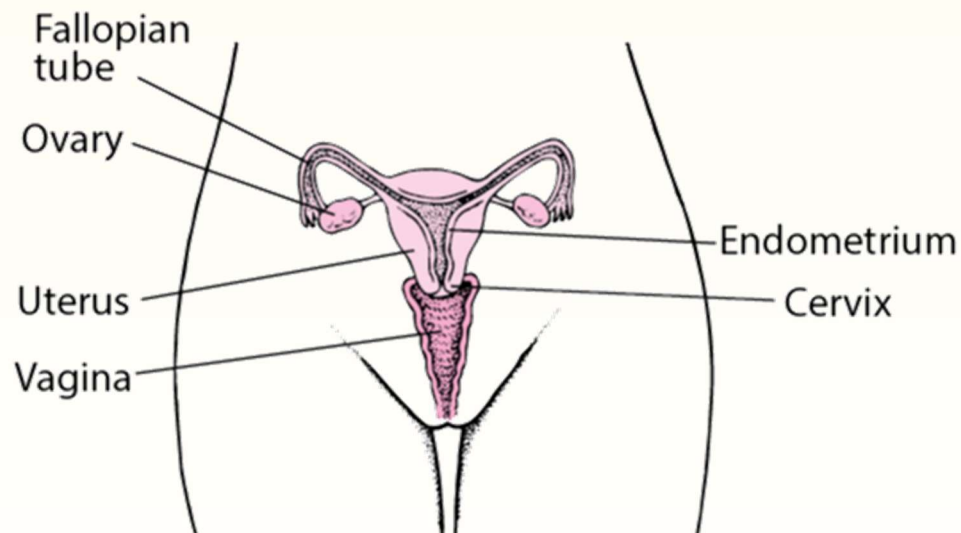
That's right, I said vulva. It is very common for the picture below to be referred to as a vagina. However, the entire genital area is known as your vulva, and the vagina is just one part of the vulva.

*External:*



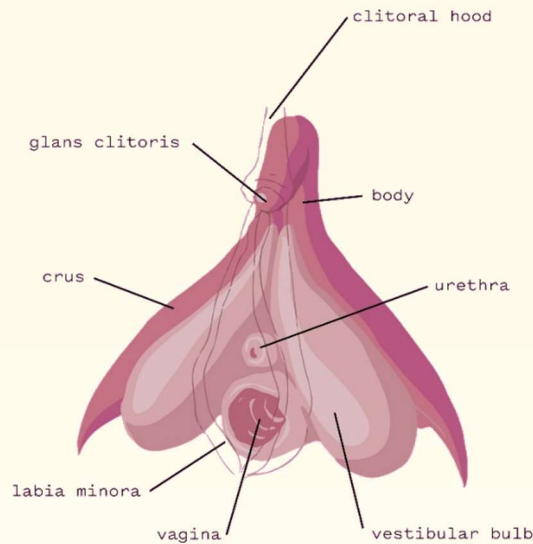
- **Anus** – the opening of the rectum (butt) and the hole where solid waste in the form of poop exits the body
- **Clitoris (aka the clit)** –the only internal organ in the entire human body that’s sole purpose is for pleasure! Located at the top of the vulva, the clitoris has over 15,000 nerve endings. Most vulva owners need stimulation to their clitoris to achieve an orgasm.
- **Hymen** – a thin piece of tissues that stretches across part of the opening to the vagina. The size, shape and thickness of the hymen is unique to every person. It can fray and tear over time from everyday activities and is not a reliable indicator of whether someone has had sex before.
- **Labia majora (the large lip)** – a large fold of tissue that protects the external genitalia organs and produces lubricating secretion.
- **Labia minora (the small lip)** – located inside the labia majora and surrounds the opening to the vagina and urethra. During sexual contact, the blood vessels inside the labia minora swell up and increase in sensitivity when stimulated.
  - Labias come in all shapes, sizes, and colors. One “lip” can even be bigger than the other and it is perfectly normal for the “small lip” to be longer than the “large lip”!
- **Perineum** – The area of skin in between the anus and vulva
- **Urethra** – located above the vaginal opening and where urine from the bladder comes out
- **Vagina** – the opening used for oral and penetrative sex. For those who were assigned female at birth, this is where menstrual blood comes from and where a baby comes out during birth

*Internal:*



Clitoris:

## The clitoral anatomy

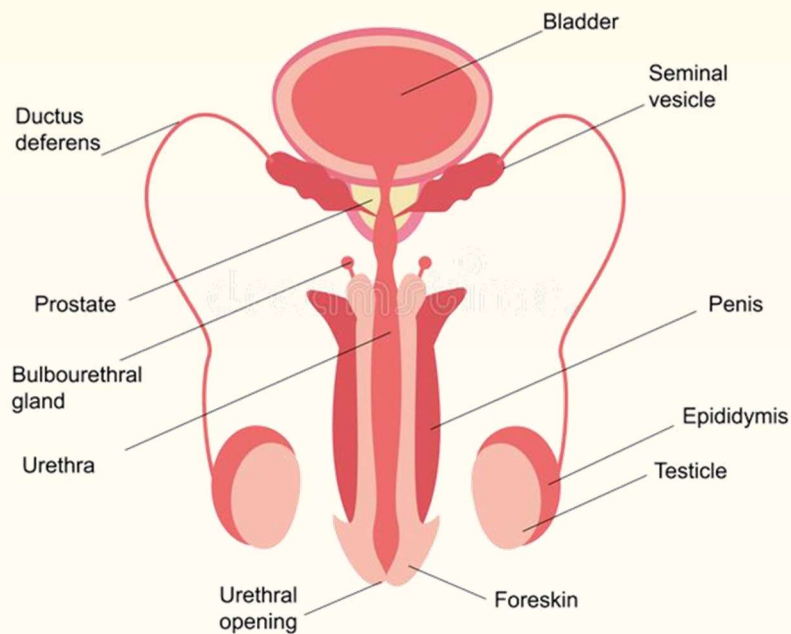


- **Clitoral hood** – where your labia minora (inner lips) meet at the top. This “hood” may cover some, all, or none of your glans clitoridis
- **Glans clitoridis** – the part most people are referring to when they talk about the clitoris. A small, sensitive bundle of nerves located above the urethral opening.
- **Body** – located behind the glans, this is the part of the “wishbone” that is still connected before splitting off into the legs or Crura
- **Crus (Crura)** -- they form the “V” of the wishbone and surround the vaginal canal and urethra
- **Vestibular Bulbs** – sit between the Crura and the vaginal canal and swell with blood when a person is aroused
- **Cervix** – a narrow passageway at the end of the uterus that connects the uterus and the vagina.
- **Endometrium** – the lining of the uterus that grows every month to help nourish a potential fertilized egg. If a fertilized egg doesn’t implant (meaning the person is not pregnant) than the lining is shed during menstruation which is sheds during menstruation.
- **Fallopian tubes** – two narrow tubes that carry an egg from the ovary to the uterus during ovulation
- **Ovaries** – the organs where eggs are stored and released. The ovaries also produce different hormones such as estrogen, progesterone, and testosterone.
- **Uterus** – a pear shaped reproductive organ that sheds its lining every month when someone menstruates (gets their periods) and where a baby develops during pregnancy. The uterus is sometimes referred to as a womb during pregnancy.

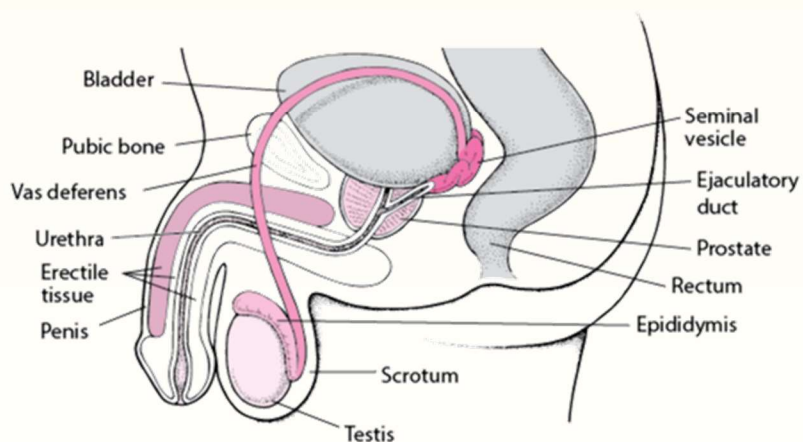
## Penile Anatomy<sup>2,4</sup>

As stated above, everyone's genitalia are unique to their bodies and can look different than others. For instance, due to religious or cultural beliefs, people with a penis, may or may not have a foreskin. If you have a foreskin, it is commonly referred to as being intact or uncircumcised, whereas those without their foreskin are circumcised. A foreskin is typically removed after birth either surgically or as part of a religious ceremony. Intact and circumcised penises are both normal and healthy.

*Intact or Uncircumcised (with a foreskin):*



*Circumcised (without a foreskin):*



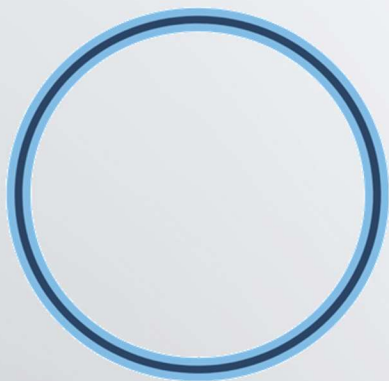


- **Bladder** – the place where urine (pee) is collected and stored before it exits the body through the urethra
- **Corpus cavernosum (or erectile tissue)** – a spongy like tissue that forms most of the penis and contains the blood vessels that fill with blood during an erection (getting hard)
- **Cowper's glands** – the gland that produce a clear pre-ejaculate fluid (or pre-cum). The fluid helps prep the urethra for ejaculation (cumming) and allows semen to pass through more easily.
- **Ejaculatory duct** – formed by the connection between the vas deferens and the seminal vesicle, semen will travel through the duct on its way out of the body through ejaculation
- **Epididymis** – the tube where sperm is stored prior to ejaculation
- **Foreskin** – a patch of skin that covers the head of the penis, when the penis is erected (hard) the foreskin will pull back to expose the tip of the penis (head or penis glans). During a circumcision procedure, the foreskin is surgically removed, so not everyone who has a penis will have one.
- **Penis** – a reproductive and sex organ that fills with blood during sexual arousal (getting hard, erection), urine and semen also move through the penis to exit the body.
- **Prostate** – the other gland that produces seminal fluid. It is also an erogenous zone as it can be sensitive to the touch and some people derive sexual pleasure when it is stimulated
- **Pubic bone** – one of three main bones that make up the pelvis
- **Rectum** – where solid waste (poop) is stored before exiting the body through the anus
- **Scrotum** – the layer of skin that hold together and protect the testicles (aka the ball sack)
- **Seminal vesicle** – this organ produces seminal fluid, a liquid that helps sperm to mobilize
- **Testis** – two ball like glands (aka testicles, balls) inside the scrotum that produce hormones like testosterone. Inside, there are hundreds of small threadlike tubes where sperm is produced
- **Vas deferens** – a narrow tube that brings sperm from each epididymis to the seminal vesicles during ejaculation (climax). During a vasectomy procedure the vas deferens is clipped to stop sperm from being released.

# Contraception

Birth control, condoms, rubbers, the pill and more! There are lots of different options for how to protect yourself and your sexual partners from unintended pregnancies and STIs.<sup>5</sup> We all have different wants, needs, finances, and lifestyles, so what works for your friend, or your roommate might not work for you. Ultimately, it all comes down to body parts and hormones! Contraceptive options all come with their own pros and cons, so it is important to **work with your health care provider to determine which birth control options meet your needs.** For those who are abstaining from sex, asexual, or have a sexual partner/s with the same sexual and reproductive anatomy that you do, contraceptive can provide additional health benefits that could be helpful to you. **External and internal condoms are the only contraceptive options that protects against pregnancies AND STIs.** Try out this [tool](#) to explore and compare different birth control methods.

## Birth Control Ring (NuvaRing, Annovera)



Cervix

Can be about 98% effective against unintended pregnancies when used correctly or 91% when accounting for human error.

A small, flexible ring that you insert into your vagina. Works by releasing hormones that stop your ovaries from releasing eggs and thickens cervical mucus to keep sperm from getting to an egg. You replace the ring with a new one every 3-4 weeks. NuvaRing should be thrown out every 3-4 weeks, whereas Annovera can be washed and reused for up to a year.

Prescription Required. Can be administered by yourself or a provider:

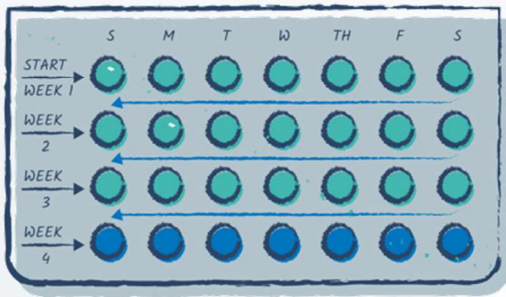
Newton Wellesley  
Hospital

Your primary care  
provider or OBGYN

Planned Parenthood

Nurx

# Oral Contraception (The Pill)



Ovaries

It is about 99% effective when taken perfectly, but since we are human, things don't always go exactly right. Some days you might forget, or your class got out late. So, when factoring in human error, it is about 91% effective. Taken orally every day at the exact same time.

Protect against pregnancy only

Prescription Required. Can be administered by yourself and picked up from:

Bentley Health Center

Planned Parenthood

Nurx

Newton Wellesley Hospital

Your primary care provider or OBGYN

# Implant (Nexplanon)



Ovaries

Nexplanon is 99% effective against unintended pregnancies and only protect against pregnancy

A small, thin rod that is placed just under the skin of your upper arm by a medical provider and lasts up to 3 years. It works by releasing hormones (progestin) that prevent you from getting pregnant.

In person office visit required:

Newton Wellesley Hospital

Your OB/GYN

Planned Parenthood

# Birth Control Shot (Depo)



Ovaries, cervix

Considered to be 99% effective against unintended pregnancies when taken within the 3-month timeframe. But with human error (i.e., not getting your shot by 12 weeks but at most 15 weeks apart) the shot is about 94% effective.

One shot of Depo-Provera into your arm or butt cheek by a healthcare provider or in your belly or upper thigh when injected by yourself. Works by releasing hormones that stop your ovaries from releasing eggs and thickens cervical mucus to keep sperm from getting to an egg.  
Lasts up to 3 months

Prescription Required. Can be administered by yourself or a provider:

Newton Wellesley Hospital

Your primary care provider or OBGYN

Planned Parenthood

# Pre-exposure Prophylaxis (PrEP)



Recommended for people who are HIV negative and at a higher risk for contracting HIV. This includes but is not limited to people who have a sexual partner/s who is HIV positive, someone with multiple sex partners or partners with an unknown HIV status, gay or bisexual men who had anal sex without an external/internal condom, have injected drugs or shared needles and syringes with others.

Considered to be 99% effective at preventing HIV when taken correctly.

A daily preventive medication that reduces the chance of getting HIV. PrEP works by helping your body produce antibodies that can stop HIV from replicating in your body before a potential exposure. PrEP only protects you against HIV and additional barrier methods should be used to prevent other STIs.

Prescription required and can be administered by yourself:

Newton Wellesley Hospital

Bentley Health Center

Planned Parenthood

Nurx

Your primary care provider or OB/GYN

# Post-exposure Prophylaxis (PEP)



Recommended for people who may have been exposed to HIV through unprotected sex with a partner/s who are HIV positive, sex with multiple sex partners or partners with an unknown HIV status, those who have injected drugs or shared needles and syringes with others, and or have been sexually assaulted.

For best results, PEP should be taken as soon after a potential HIV exposure as possible. It is most effective when the first dose in the four-week series is taken within 72 hours of an exposure.

A daily medication taken for four-weeks to reduces the chance of getting HIV after a potential exposure.

Prescription required and can be administered by yourself:

Newton Wellesley Hospital

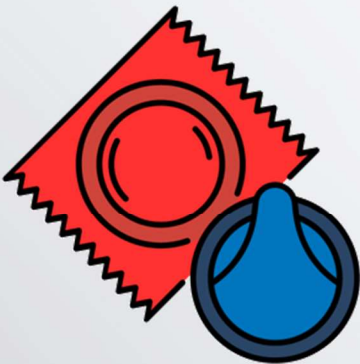
Bentley Health Center

Planned Parenthood

Nurx

Your primary care provider or OB/GYN

# External Condoms (rubber, glove, raincoat, male condom, and many more)



Penis, Sex Toy

Can be about 98% effective against unintended pregnancies and STIs when used correctly or 87% when accounting for human error

Traditionally a latex barrier placed over a penis to contain sperm from entering the vagina and a layer of protection to reduce STIs during vaginal or anal penetration and mutual masturbation. It is also available in latex free materials. Must be used every time you have sex and disposed of in the trash afterwards. Do not flush! Fun fact – ever seen a flavored condom? While they are a great option to spice up oral sex, they are not meant for penetrative sex (vaginal or anal). Those fun flavors can lead to yeast infection and other not so fun irritations

No prescription required and can be administered by yourself. Latex or Latex free options are available for purchase or free at different locations on campus:

Falcon Mart

Office of Community Wellbeing & Health Promotion (free)

Falc Yeah Condom Program (free)

First Year RD Offices (free)

Bentley Health Center (free)

Amazon, Target, CVS, Walgreens etc.

# Internal Condoms (FC2, female condom)



Vagina, Penis

Can be about 95% effective against unintended pregnancies and STIs when used correctly or 79% when accounting for human error.

A latex barrier placed inside the vagina or anus to contain sperm. It also serves as a layer of protection to reduce STIs during vaginal or anal penetration. The internal condom can also be placed ahead of time and can be worn for up to 8 hours. Must be used every time you have sex and disposed of in the trash afterwards. Do not flush!

Can be administered by yourself. Prescription required if picked up from:

Newton Wellesley Hospital

Planned Parenthood

Your primary care provider or OB/GYN

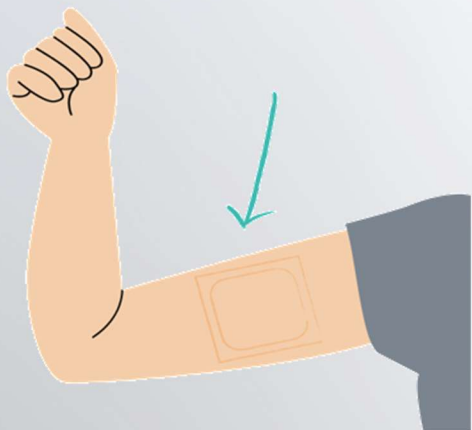
Can be administered by yourself. Free and no prescription required if picked up from:

Bentley Health Center

Office of Community Wellbeing & Health Promotion

Ealc Yeah Condom Program

# Birth Control Patch (Xulane, Zafemy, Twirla)



Ovaries, cervix

Can be about 99% effective against unintended pregnancies when used correctly or 93% when accounting for human error

A thin beige square or round shaped patch that sticks to your skin and produce hormones that keep your ovaries from releasing eggs and thicken cervical mucus to block sperm from finding an egg. Patches should be changed weekly. The patch can be placed on your stomach, butt check, arm, or back. Patches only comes in a nude color and will appear more visible on darker skin tones.

Prescription required and can be administered by yourself:

Planned Parenthood

Nurx

Newton Wellesley Hospital

Your primary care provider or OB/GYN

# Pull Out Method (Withdrawal, Coitus Interrupts)



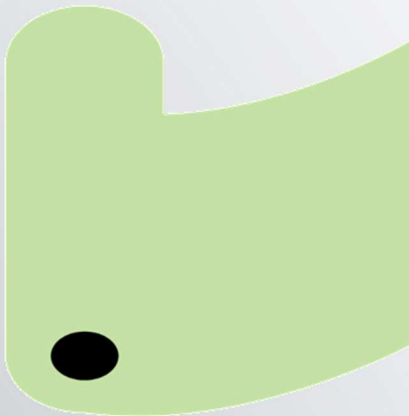
Penis

Can be about 78% when accounting for human error as it must be done perfectly every single time (which is nearly impossible!)

Works by pulling a penis out of a vagina prior to ejaculation (cumming) to keep semen (cum) out of the vagina.  
It must happen every time you have sex and every time prior to ejaculation. Though pre-cum fluids can also contain sperm.

This method works best when combined with another form of birth control and is **not recommended as a standalone contraceptive option.**

# Dental Dams (Oral Dams)



Vagina, Anus

A thin latex barrier placed over the vulva or anus during oral sex to reduce risk of contracting an STIs. It is often scented with options of vanilla, spearmint, strawberry, or banana. Must be used every time you have sex and disposed of in the trash afterwards. Do not flush!

**Fun fact** – in a pinch you can cut up an external or internal condom and use it as a dental dam. This is especially convenient if your sexual partner has a latex allergy.

No prescription required and can be administered by yourself:

Amazon

Walmart

Office of Community Wellbeing & Health Promotion

Bentley Health Center

Falc Yeah Condom Program

# Emergency Contraception Pill (ECP, Plan B, The Morning After)



Ovaries

For best result, ECP should be taken as soon after unprotected vaginal sex as possible. It is 95% effective against unintended pregnancies when taken within 24 hours and 85% effective within 72-hours.

Taken orally within 72 hours (or 3 days) after unprotected vaginal sex. But the sooner you take it, the better. Works by temporarily stopping your ovaries from releasing an egg, if there is no egg for the sperm to find, then pregnancy cannot occur. It is not a form of an abortion, nor does it cause an abortion. Should be used as occasionally and not relied upon as a primary birth control option. Using ECP does not impact your future fertility. Certain brand (Plan B One-Step, ella, Next Choice etc.) work better on people under a certain weight than others, so it is important to explore what option would work best for your body type.

No Prescription Required. Can be administered by yourself or a provider. Bentley Health Center has one of the cheapest ECP option - \$20 for students, and free for survivors of interpersonal violence. You can also purchase it from:

Newton Wellesley Hospital

Planned Parenthood

Nurx

Your primary care provider or OBGYN

Amazon, Target, CVS, Walgreens etc.

# Intrauterine Device (IUD) – Hormonal and Non-Hormonal



Uterus

IUDs are 99% effective against unintended pregnancies. IUDs can also be used as a form of emergency contraception (instead of Plan B) if placed within 5 days of unprotected sex.

A t-shaped piece of plastic is inserted into the uterus by a medical provider, and it works by changing the way sperm moves, making it difficult to find an egg. Hormonal IUD (Mirena, Kyleena, Skyla, Liletta) last up to 7 years and the non-hormonal copper IUD (Paragard) last up to 12 years.

In person office visit required:

Newton Wellesley Hospital

Your OB/GYN

Planned Parenthood



# Sexually Transmitted Infections (STIs)

## STI or STD – what is the difference?<sup>6</sup>

Sexually Transmitted Infections or STIs use to commonly be referred to as STDs or sexually transmitted diseases. But they both technically mean the same thing – an infection that is transmitted from one person to another during sex. STIs are currently the most accurate and least stigmatizing term that health care professionals are using now. The word “disease” sounds scary and implies there is a larger problem going on with you. That is not always the case with an STI. Most people will be asymptomatic, or experience little to no symptoms. This is what can make STIs spread easily because people may be infected and not even know it!

Thanks to modern medicine, STIs are either treatable or curable. When treated early, many STIs will not impact your quality of life or your ability to have sex, as we once believed. An STI that is curable means that with the right medication, you will be able to rid yourself of the infection in a few days. A treatable STI means that while you cannot cure the condition, you can manage it with medication to reduce the ability to transmit the infection to others.

The following is a list of common STIs that millions of people get in the United States every year. A positive STI result is nothing to be ashamed of because you are not alone. 1 in 5 people in the US have an STI.<sup>7</sup> People aged 15-24 account for almost half of new STIs that occur in the United States each year.<sup>7</sup> In 2021, 13% of college students found that having Chlamydia or Gonorrhea negatively impacted their academic performance.<sup>8</sup> It is incredibly important to be routinely tested for STIs so you can be informed about your status and seek treatment options immediately. STIs that are left untreated can cause serious health problems and in rare cases death. **External and internal condoms are your best protection options from STIs!**

## Bacterial Vaginosis<sup>9</sup> | Common | Treatable

Bacterial Vaginosis (BV) is a result of too much bacteria in the vagina that disrupts the normal balance of the bacteria that natural exists in a vagina. Researchers are not entirely sure what specific causes BV but individuals with a vagina that are sexually active more likely to get it than those who are not having sex. But having BV can put you at risk of contracting other STIs. If your sexual partner has a penis, you cannot transmit BV to them, but BV can be transmitted to a sexual partner with a vagina.

Some symptoms that might occur:

- a thin white or gray vaginal discharge,
- pain, itching, or burning sensation in the vagina

- A strong fish-like odor, especially after sex
- Burning sensation when peeing
- Itching around the outside of the vagina

Treatment options: Your healthcare provider can treat BV with a course of antibiotics. Make sure to take all the pills you were prescribed, even if you feel better after a few days.

*How can I reduce my risk of getting BV?*

Again, while healthcare professionals do not know a lot about how BV is spread, there are some things you can do to help reduce your risk of getting BV.

- Limiting your number of sex partners
- Not douching
- Using external or internal condoms during vaginal or anal sex
- Not having sex

### **Chlamydia<sup>10</sup> | Common | Curable**

One of the most common STIs annually reported in the United States. If left untreated, it can cause infertile issues in uterus bodied individuals or increase your risk of an ectopic pregnancy, (a pregnancy that occurs outside of the womb and can be a fatal condition). Chlamydia often appears asymptomatic in people which makes it spread so easily, as many people might not know they have it.

While Chlamydia often has no symptoms, some symptoms that might occur include:

- Abnormal vaginal or penile discharge
- Burning sensation when peeing
- Rectal pain, discharge, or bleeding
- Smelly discharge

Treatment options: Your healthcare provider can treat Chlamydia with a course of antibiotics. Make sure to take all the pills you were prescribed, even if you feel better after a few days. Your healthcare provider will tell you and your partners to abstain from sex for seven days after a single dose antibiotic or once you finish your multiple day dose of antibiotics. Repeat infection is common and you should get tested about three months after your initial treatment. Taken medication in the past, doesn't mean that you can't contract Chlamydia again.

*How can I reduce my risk of getting Chlamydia?*

- Using external and internal condoms and or dental dams every time you have anal, vaginal, or oral sex
- Routine STI testing
- Mutual monogamous relationship with a partner who has been tested

### **Gonorrhea<sup>11</sup> | Common | Curable**

One of the most common STIs annually reported among people aged 15-24 in the United States. Gonorrhea often appears asymptomatic in people which makes it spread so easily, as many people might not know they have it.

While Gonorrhea often has no symptoms, some symptoms that might occur include:

- Increased vaginal discharge
- Burning sensation when peeing
- Rectal pain, discharge, or bleeding
- Smelly discharge

### **Herpes<sup>12</sup> | Common | Treatable**

While often the butt of a joke, herpes is one of the most common STIs among adolescents and adults in the United States. There are two types of the herpes simplex virus (HSV) – HSV-1 – oral or HSV-2 – genital. Don't be fooled by their classifications though, HSV-1 can be found on your genitals just as HSV-2 can be found in your mouth both from performing or receiving oral sex. Like many other STIs, a person with herpes can show no symptoms, as it lays dormant in your body. Some people might go their whole lives without ever having a herpes outbreak, but they still have the virus. While you cannot cure herpes, it has become highly manageable with condoms and prescription medications that reduce a person's ability to spread the virus. There is a lot of fear and stigma attached to herpes unlike any other STI.

Most people with herpes will experience no symptoms or mild symptoms that are often mistaken for something else. Symptoms include:

- Sores, or an "outbreak", appear as one or more blisters around the genitals, rectum, or mouth.
- Burning when peeing
- Bleeding between periods
- Smelly genital discharge

Treatment options: Your healthcare provider can prescribe medications that can prevent or shorten outbreaks. You could also be prescribed to take one of these medications everyday as a

form of suppression therapy to reduce the likelihood of transmitting the infection to someone else. with a course of antibiotics.

## **HIV & AIDS<sup>13</sup> | Common | Treatable**

Human Immunodeficiency Virus (HIV) is a STI that attacks cells in our bodies designed to fight infections thus making a person immunocompromised. HIV is spread through blood, saliva, breast milk, and semen. Often this occurs during unprotected sex or when you encounter someone's bodily fluids, such as sharing needles. However, if left untreated HIV can lead to AIDS (acquired immunodeficiency syndrome). There is no cure for HIV, so it is something that a person will manage for the rest of their lives. There are lot of medications now that a person can take to help reduce their viral load of HIV to nearly undetectable levels, as well as preventive and post exposure measures people can take to reduce their risk of contracting HIV.

HIV occurs in three stages with different symptoms at each phase. Not everyone's symptoms will present the same but here are some examples of symptoms at each stage.

Stage 1: Acute HIV Infection – occurs within 2-4 weeks after contracting the virus. Most people will experience flu like symptoms or no symptoms at all:

- Fever
- Chills
- Rash
- Night sweats
- Sore throat
- Fatigue
- Swollen lymph nodes
- Mouth ulcers

Stage 2: Clinical Latency or chronic HIV Infection – People may feel sick or experience mild symptoms. Taking HIV medication can help keep viral loads at undetectable loads, people can live a long and healthy life and not transmit HIV to their sexual partners. Without treatment, this stage can last around 10-15 years, through some may move through it faster.

Stage 3: AIDS – Without long term treatment, the virus will break down your body's immune system and progress from HIV to AIDS. This is the last stage of the HIV infection and some symptoms you may experience include:

- Rapid weight loss
- Recurring fever or profuse night sweats
- Extreme and unexplained tiredness

- Prolonged swelling of the lymph glands in the armpits, groin, or neck
- Diarrhea that lasts for more than a week
- Sores of the mouth, anus, genitals
- Pneumonia
- Red, brown, pink, or purplish blotches on or under the skin or inside the mouth, nose, or eyelids
- Memory loss, depression, and other neurologic disorders

Treatment options: Seek out a health care provider for medications for managing HIV. See the Contraceptive chapter to learn about prevention strategies.

*How can I reduce my risk of getting HIV?*

- Using external and internal condoms and or dental dams every time you have anal, vaginal, or oral sex.
- Getting on PrEP if you think you are at high risk of contracting HIV

### **HPV<sup>14</sup> | Common | Treatable**

Human Papillomavirus (HPV) as known as genital warts, is a group of viruses that has over 200 strains! 40 of the virus strains spread through sexual, intimate, skin to skin contact. Some of the strains can also cause various cancers such as cervical, anal, oral, throat, vulvar, vaginal, and penile. Many HPV infections can go away on their own and do not lead to cancer, however those that are left untreated can lead to more severe outcomes. If someone were to experience symptoms from HPV, though some will be asymptomatic, you might experience warts on your genitals, anus, mouth, or throat.

*How can I find out if I have HPV?*

- Individuals with vaginas, can be tested for HPV during routine Pap tests or HPV tests.
- Individuals with penis who have warts can be diagnosed visually by a medical provider, but if asymptomatic, there is currently no test for HPV for those with penile anatomy.

Treatment options: There is no treatment for the virus HPV, but your healthcare provider can help you manage symptoms from it.

*How can I reduce my risk of getting HPV?*

- Using external and internal condoms and or dental dams every time you have anal, vaginal, or oral sex.
- Getting the HPV vaccine (Gardasil) to protect yourself against the cancer-causing HPV strains.

# Communication

The best time to have any conversation related to your sexual healthcare with your romantic and or sexual partners is BEFORE you get into the bedroom. These are not the kind of conversations that you want to leave till the heat of the moment. You want to make sure that both of you can actively listen to the other, that you are not under any pressure, or the influence of alcohol and other drugs.

It might be a little awkward to first, but it is an important part of having a healthy, fun, and safe sexual experience. Asking someone to get tested prior to sexual activity has nothing to do with not trusting the other person, it is about making sure that everyone is informed about their STI status, so you can decide what contraceptive options are best for you.

- Be specific about which STIs you were tested for (standard test is chlamydia and gonorrhea), if you do have a positive result explain the treatment plan, offer to go with your partner to get tested
- People will have a variety of reactions, but it is important to be prepared to answer any questions they may have, provide some resources that you might have found helpful, and allow them space and time to process everything.
- To learn more about how to have these conversations with your sexual partner, you can learn more [here](#).

## Possible Conversation Starters for Talking with a Partner:

- FYI, I recently got tested for STIs and I didn't have anything. Have you ever been tested? I want us to make sure we're taking care of each other.
- This is hard for me to talk about, but I care about you, and I think it's important. How do you feel about going to get tested for STIs together?
- Using a condom/dental dam/barrier is important to me, do you usually use them?
- When was the last time you were tested for STIs?
- Do you know if you have any STIs? If you do, what ways can we engage in sexual activity safely together?
- Many people who have an STI don't know it. Why take a chance when we can know for sure?

## Possible Conversation Starters for Talking with a Healthcare Provider:

- Can we spend a few minutes today talking about my sexual health?
- We've never talked about my sexual orientation. You should know that I am \_\_\_\_\_. What do I need to know about protecting myself and my sexual health?
- How often should I get retested?

- What kind of STIs am I being tested for?
- I'm worried about confidentiality – are my results private? Will my parents, caregiver, and or the insurance policy holder find out?
- How do I know if I have an STI?
- What will the STI test be like? How often should I get tested for STIs including HIV?
- I want to avoid unwanted pregnancy for me/my partner. Can we talk about birth control?
- Which activities are more likely to spread STIs?
- If I do test positive for an STI, what are my options?

Communicating your boundaries is one of the ways you can sustain meaningful relationships while also advocating for your needs. Everyone has different boundaries, and it is important to talk about them openly and honestly. It can be hard to set limits with our loved ones, but we also want to prioritize our health and safety. It's okay to not text your friends back right away, you don't have to say yes to going out when you would rather watch Netflix alone, and you can say no to any sexual act that makes you uncomfortable – you are not obligated to say yes and shouldn't feel guilty to say no. Remember to advocate for your needs, communicate your boundaries and be empowered to say no if something is not working for you. We know it's sometimes easier said than done, but your personal boundaries are not something to compromise on. This is why it is important to keep people who can respect your boundaries within your interpersonal circles and walk away from those who don't.

### **Healthy vs. Unhealthy Relationships**

While these are some common signs of an unhealthy or toxic relationship, it is by no means an exhaustive list. It is important to build a relationship where everyone feels respected, safe, and cared for. Unhealthy relationship elements do not just occur in romantic or sexual relationships. You can experience some of these toxic behaviors from friends and family members as well. Some of these behaviors may seem insignificant but they can escalate to more dangerous situations quickly, if not addressed. If you or a friend is experiencing an unhealthy or toxic relationship, please check out the resource page for ways to get support on and off campus.

### **Unhealthy Relationship Signs<sup>15</sup>**

1. **Intensity** – rushing the pace of the relationship (either coming on too fast or too strong), seems obsessive about wanting to see you all the time, and needs to be in constant contact with you.
2. **Possessiveness** – while jealousy is a normal emotion it can become unhealthy when it causes someone trying to control who you spend time with or for how long. This can manifest into being upset with who you are texting, accusing you of being unfaithful without cause, or stalking you. Being “overprotective” or “having strong feelings” is not an excuse for controlling and possessive behaviors.

3. **Manipulation** – whether it's done in a subtle or passive way, manipulation occurs when someone is trying to control your decisions, your actions and even your emotions. This can look like someone convincing you do something you aren't comfortable with, tries to influence how you feel about a certain situation, or gaslighting you.
4. **Isolation** – if you are feeling pressured to pick between spending time with your partner and your friends, if you feel they are intentionally trying to keep you away from your loved ones, if they make you question your own judgement and perception of your friends and family. You may feel like you must be dependent on your partner for love, money, or acceptance.
5. **Sabotage** – someone that intentionally ruins your reputation, dampens your achievements, or dismisses your success. Some behaviors could include talking behind your back, spreading rumors, or threatening to share private information or photos of you.
6. **Belittling** – someone who consistently says negative things about you like name calling, making rude remarks about someone you care about, criticizing you, or making fun of you – even if they try to pass it off as a joke.
7. **Guilting** – someone who makes you feel responsible for their own actions or implies that it is your job to be their sole source of happiness. They may blame you for things that are beyond your control or threaten to harm themselves if you try to break up with them.
8. **Volatility** – when someone's reaction is unpredictable and often makes you feel scared, confused, or intimidated. You might feel like you are walking on eggshells around them or that they will freak out over small things. They may react by yelling at you, being violent, threatening you or having a major mood swing.
9. **Deflecting Responsibility** – when someone constantly makes excuses for their unhealthy behaviors. They place the blame on you or others for their own actions and can't own their mistakes.
10. **Betrayal** – when someone is being disloyal, lying or being deceitful. You may see them act one way with you and differently around others, they may share private information or photos of you without your consent, or cheat on you.

### Healthy Relationship Signs<sup>16</sup>

What are some examples of signs you are in a healthy relationship? Some of those signs include:

1. **Trust** – you trust this person to be there for you when you are having a bad day, you don't fear they will hurt you or talk about you behind your back. You never have to consistently prove to them that you care about them or are faithful.



2. **Honesty** – you can be open and honest about how you feel or talk about things going on in your life without being fearful of their reactions. You are allowed to keep things private from your partner, but you aren't doing it because you feel like you can't be your full authentic self with them.
3. **Independence** – you and your partner can both have a life outside of the relationship without it being an issue. They are supportive of you pursuing hobbies or spending time with friends and family. You don't feel like they are keeping tabs on you, or as if you must check in with them all the time so they know what you are doing.
4. **Respect** – you can set boundaries and know that the other person will respect them. You feel like you are being supported and encouraged to pursue things you are passionate about without judgement.
5. **Equality**- you feel appreciated and are treated as an equal member of the relationship. You make compromises instead of one person always getting their way. You feel like your opinions, interests, and needs are just as important as the other person's.
6. **Kindness** – you both care for one another and are empathic towards each other. The both of you feel supported and safe within the relationship.
7. **Healthy Conflict** – it is normal for people to fight and disagree from time to time. But there is a right and a wrong way to solve disputes. In a healthy relationship you can have an open dialogue where you can respectfully discuss your conflicts without being judged, yelling at each other, or putting the other person down. You use “I” statements and active listen to the other person when they share. You can address the root cause of the issue and solve it before the problem escalates into something bigger.
8. **Comfortable Pace** – the relationship is moving at a pace that feels comfortable for both individuals. You don't feel pressured or rushed to be at a stage, that you aren't ready for yet.
9. **Taking Responsibility** – you can own up to your mistakes, apologize when you have done something wrong, and work together to move past it. You both can acknowledge when your words or behavior had a negative impact even if you had good intentions to start. You don't try to place blame on others and can reflect on how your action may have harmed your partner.
10. **Fun** – A relationship should add to your life, not take away from it. You should be able to be your true self and enjoy spending time with your partner. Things won't always feel fun and perfect, but you should experience more times of joy than times of sadness or angry.

# Consent

Consent is sexy AF! What is sexier than knowing that your partner is excited to engage in sexual activity with you and you have communicated with one another of your expectations, likes and dislikes? There is no such thing as “nonconsensual sex”, sex that doesn’t not involve consent is sexual assault.

- Consent is a clear and voluntary agreement to engage in specific acts of sexual contact or activity, communicated through mutually understandable words or actions. Consent is always freely informed and actively given. Consent is an affirmative process. It is the responsibility of the person who wants to engage in sexual activity to make sure that they have received consent. If an individual initiating sexual activity is not sure if they have received consent, they have an obligation to seek additional clarification, as consent cannot be based on assumption. The existence of a dating relationship does not imply consent, and even once consent has been given, it can be withdrawn at any time. If consent is withdrawn, that sexual activity should cease immediately.
- Consent can never be assumed or implied. The absence of “No” or silence does not mean that consent has been given. Additionally, consent to one form of sexual activity does not imply consent to other forms of sexual activity.
- Consent is not present and may never be obtained:
  - Through the use of coercion, manipulation, intimidation, or force
  - From an individual who is incapacitated
  - From an individual who is under the legal age of consent (**16 in the state of Massachusetts**).
  - Definitions of coercion, force, and incapacitation are included below:
    - **Coercion** is unreasonable pressure for sexual activity. Coercion can include the use of verbal or physical conduct such as manipulation, intimidation, isolation, force, or threats. Coercion includes continued pressure after an individual has made it clear that they do not want to engage in the behavior. Coercive behavior differs from seductive behavior based on the type of pressure someone uses to get consent from another. When someone makes clear to you that they want to stop, or that they do not want to go past a certain point of sexual interaction, continued pressure beyond that point can be coercive.
    - **Force** is not only limited to physical violence but also includes threats, intimidation, abuse of power, coercion, duress, or any combination of these behaviors to overcome an individual’s freedom to choose whether to engage in sexual activity. Sexual activity that is forced is, by definition, non-consensual. Silence or the absence of resistance alone is not consent. Consent is not demonstrated by the absence of resistance.

While resistance is not required or necessary, it is a clear demonstration of non-consent.

- **Incapacitation** consent is not present when an individual is incapacitated. An Incapacitated individual is someone who cannot make rational, reasonable decisions because they lack the capacity to understand the “who, what, when, where, why, or how” of sexual interaction. This includes a person whose incapacity results from mental disability, sleep, involuntary physical restraint, unconsciousness, or use of alcohol or other drugs. Incapacitation is a state beyond drunkenness or intoxication. A person is not necessarily incapacitated merely as a result of drinking or using drugs. The impact of alcohol and other drugs varies from person to person, and if there is any doubt as to the level or extent of the other person’s intoxication or impairment, the prudent course of action is to forgo or cease any sexual contact or activity.
  - **In evaluating consent in cases of alleged incapacitation**, the University asks two questions: (1) Did the person initiating sexual activity know that the other party was incapacitated? and if not, (2) Should a sober, reasonable person in the same situation have known that the other party was incapacitated? If the answer to either of these questions is “Yes,” consent was absent, and the conduct is likely a violation of this policy.
- **Under legal age**, consent is never present if an individual is under the legal age of consent (16 in the state of Massachusetts).

**Another way to think of consent is with the acronym FRIES<sup>18</sup>:**

- **Freely Given** – You are making this choice without pressure, coercion, or under the influence of alcohol and other drugs.
- **Reversible** – You can take away consent at any time. Just because you agree to this on Monday, doesn’t mean you agreed to it on Tuesday. You can stop in the middle or right before anything happens. Being in any kind of platonic, romantic, and or sexual relationship with someone doesn’t mean you always have their consent.
- **Informed** – You have a right to ask questions and communicate with your sexual partners about what is about to happen. Do you know their STI status? Did you agree to use external condoms? You can only consent to something if you have all the information. If your partner has been misinformed about your intention, you have violated their consent. For example, stealthing, or when a partner removes a condom during sex without your consent, shows that you were not fully informed of their intentions.
- **Enthusiastic** – YES! You want to engage in sexual activities that you are excited about and that you want to do. You should not do something because you feel like you have to do it.

- **Specific** – Agreeing to one action is not agreeing to every action. If you said you wanted to make out, that doesn't mean you said yes to sex. If you said yes to anal sex, it doesn't mean you said yes to oral sex. You need consent for each sexual act every single time.

# CONSENT



**F**reely Given  
**R**eversible  
**I**nformed  
**E**nthusiastic  
**S**pecific



To learn more about consent and interpersonal violence prevention, [request a program](#) from the RSVPs (Relationship and Sexual Violence Prevention Educators).

# Pleasure

Pleasure during any sexual experience (sex, masturbation, etc.) is often not included in traditional sexual health curriculums. Often, the focus is on sex as a means of reproduction and not as a pleasurable human experience. Any sexual experience should be something that everyone involved finds pleasurable and meets their needs. It is okay (and highly encouraged) to ask for what you want in these experiences, as you want them to be pleasurable for all that are involved. Communicating with your sexual partner(s) and asking for consent to try different things, leads to a better sexual experience for everyone.

## **Masturbation<sup>19</sup>**

One way we can explore what is most pleasurable for us is through masturbation. You have probably heard masturbation referred to by a lot of different euphemism like – jerking off, self-love, solo sex, and many others. Despite masturbation being a very normal and healthy act, some cultures (the United States included) often place a lot of shame and attached stigma to those who do it. For some cultural or religious beliefs, it is seen as promoting sex before marriage or encourages adolescents and young adults to explore their sexual identities too soon. You might have even it seen to be deemed as a bad thing when people who identify as women do it, but often celebrated and encouraged among those who identify as men, especially in media.

We are here to help normalize the idea that being intimate with yourself or practicing mutual masturbation are very normal, healthy, and even fun ways to experience sexual pleasure. And if it is ultimately not for you, that is perfectly okay too.

### The Benefits of Masturbation<sup>20</sup>:

- Sexual self-exploration
- Self-connection
- Improve self-image
- Strengthen pelvic muscle tone
- Release sexual tension
- Fun!

### The Benefits of an Orgasm<sup>21</sup> (sometimes, but not always the result of masturbation)

- Reduce headaches
- Improve heart health
- Decrease menstrual cramps
- Aide in sleep
- Reduce stress
- Relieve muscle tension

## Sex Toys<sup>22</sup>

How one might choose to masturbate and what tools they use to help – whether it’s hands or a sex toy – is up to your own discretion. It is also worth experimenting with various things until you find what works best for you. However, if you are using sex toys, each product is made from different materials that require different levels of care.

Toy Type	Function
Vibrator	Often used to stimulate the "clit" or "g-spot", vibrators can also be used on any erogenous zone (any area of the body that is sensitive to sensual or sexual touch) of the body for increased pleasure
Dildo	Often used for internal stimulation. Many come with a flared or suction base making them multipurpose.
Anal Toys	Come in a variety of shapes and sizes and are meant to be inserted into the anus. Can be used to stimulate the prostate or the nerves around the opening of the anus. It is important that they have a flared base.
Sleeves	Designed for external stimulation for those with penises. Can be realistic or discreet.
Cock Rings	Can be vibrating or not and are meant to be worn around the base of the penis to increase sensation.
Suction	Use air pressure and sometimes vibrations to stimulate in a way that many people describe as feeling like oral sex. Can be used over the "clit", the nipples, or other erogenous zones.

## Care & Cleaning<sup>22</sup>

If we want our sex toys to take care of us, we need to take care of them. All of the toys in the table above come in a variety of parts and pieces that may need to be cleaned in different ways. The table below breaks down how to clean different toys based on the material they are made of. This list is not all inclusive, so we encourage you to check out our resources at the end if you have more questions.

Toy material	Cleaning method
Non-porous, body safe (pure silicone, stainless steel) & without a motor	Cleanse with an unscented, gentle hand soap and warm water Can also be sanitized by boiling it in water for 5-10 minutes
Non-body safe (rubber, TPE/TPR)	Cover with a new condom for each use Some can be gently cleansed with soap and warm water
Motorized	Keep all motorized parts out of the water (unless the product explicitly states it is waterproof) Any other parts can be cleaned according to the other material they fall under on this table

\*Lube is a very important part of this conversation too, but we will cover that next.

# Lube

I know what you are thinking, why does lube have its own section? Trust us, that is just how important it is. There are three main types of lubes that have different considerations<sup>23</sup>.

Lube Type	Advantages	Disadvantages
Water-based	<ul style="list-style-type: none"><li>• Latex-friendly</li><li>• Safe for vaginal &amp; anal use</li><li>• No fabric stains</li></ul>	<ul style="list-style-type: none"><li>• Some ingredients may be irritating</li><li>• Dries out quickly</li></ul>
Silicone	<ul style="list-style-type: none"><li>• Latex-friendly</li><li>• Stays slippery longer than others</li><li>• Safe for vaginal &amp; anal use</li></ul>	<ul style="list-style-type: none"><li>• Can stain</li><li>• NOT to be used with silicone or cyber skin toys</li><li>• Slippery</li></ul>
Oil-based	<ul style="list-style-type: none"><li>• Good for external male masturbation</li><li>• Inexpensive &amp; accessible</li></ul>	<ul style="list-style-type: none"><li>• NOT for vaginal or anal use</li><li>• NOT for use with latex condoms or toys</li><li>• Can stain fabric</li></ul>
Natural/plant based	<ul style="list-style-type: none"><li>• All-natural</li><li>• Can be safe for vaginal and anal use</li></ul>	<ul style="list-style-type: none"><li>• NOT for use with latex condoms or toys</li><li>• Can stain fabric</li><li>• Can go rancid</li></ul>
Flavored	<ul style="list-style-type: none"><li>• Fun flavors</li></ul>	<ul style="list-style-type: none"><li>• NOT for vaginal use</li></ul>

Lube serves two main purposes<sup>23</sup>:

## Purpose Number One: Pleasure

- Lube makes things feel better. There I said it. And I meant it.
- Lube with sex toys: try to always use lube with anal toys but it's not a bad idea to use it with other toys too. However, if you are using a toy made of silicone use a water-based lubricant because a silicone-based lubricant will break down a silicone toy.

## Purpose Number Two: Sexual Health Care (like self-care, but for sex)

- Lube can help to prevent tearing during any type of sexual activity. Specifically, it prevents tearing of barrier methods and microtears in skin. This can reduce the risk of STI transmission and unintended pregnancy. So, while lube is not considered the contraception itself, it can act as a facilitator for safer sex.



# Resources

## On Campus

- [Health Center](#)
  - Services: STI testing, pregnancy testing and counseling, Emergency Contraceptive Pill (Plan B), review contraceptive options, PrEP/PEP, Gender Affirming Care, confidential resource
  - Location: Rhodes Hall
  - Contact: 781.891.2222
  - Hours of Operation: Monday – Friday 8:30a – 4p. After-hours care also available by calling the main phone number
- [Community Well-being and Health Promotion](#)
  - Services: sexual health education, [Falc Yeah](#) – free sexual health safety supplies, confidential resource, peer education groups -Wellbeing Educators (WEs) and Relationship and Sexual Violence Prevention Educators (RSVPs)
  - Location: Callahan Building – 2<sup>nd</sup> floor (Above UP)
  - Contact: 781.891.2600 or [thrive@bentley.edu](mailto:thrive@bentley.edu)
  - Hours of Operation: Monday – Friday 8:30a – 4:30p
- [Counseling Center](#)
  - Services: free and confidential mental health and emotional well-being support services
  - Location: Callahan Building – 2<sup>nd</sup> floor (Above UP)
  - Contact: 781.891.2274
  - Hours of Operation: Monday – Friday 8:30a – 4:30p. After-hours care also available by calling the main phone number
- Identity specific resources such as the [Multicultural Center](#) (MCC), [Gender and Sexuality Student Programs](#) (GSSP), [Spiritual Life](#), and [the Center for International Students and Scholars](#) (CISS) are also great areas to seek guidance and support from while on-campus

## In the Boston area

- [Newton Wellesley Hospital](#)
  - Services: Primary Care, Obstetrics & Gynecology, 24/7 Emergency room, Emergency Contraceptive Pill (Plan B), STI testing, SANE (Sexual Assault Nurse Examiner) services, Contraception
  - Location: 2014 Washington St, Newton, MA 02462
  - Contact: 617.243.6000
- [Fenway Health](#) – specializes in LGBTQIA+ health care
  - Services: Contraception, PrEP/PEP, Transgender Health, Obstetrics & Gynecology, HIV/STI testing, and more
  - Location: 1340 Boylston St, Boston, MA 02215
  - Contact: 617.267.0900
- [Planned Parenthood Greater Boston Health Center](#)
  - Services: STI testing, Contraception, pregnancy test and counseling, Emergency Contraceptive Pill (Plan B), abortion services, routine gynecological services, Gender Affirming Hormone Therapy, PrEP/PEP
  - Location: 1055 Commonwealth Ave, Boston, MA 02215
  - Contact: 1.800.258.4448
- [AFC Urgent Care - Waltham](#)
  - Services: Urgent care (non-emergency related), STI testing
  - Location: 1030 Main St, Waltham, MA 02451
  - Contact: 781.894.6900
- [REACH Beyond Domestic Violence](#)
  - Services: free and confidential survivor support services including emergency shelter and community-based advocacy and more
  - Contact: 1.800.899.4000 (Support Hotline)
- [Boston Area Rape Crisis Center \(BARCC\)](#)
  - Services: free and confidential survivor support services including medical and legal advocates, counseling and support groups, case management and more
  - Location: 24 Crescent St, Suite 202, Waltham, MA 02453
  - Contact: 1.800.841.8371 (Support Hotline)
- Local Pharmacies
  - Services: Emergency Contraceptive Pill (Plan B), pregnancy test, sexual health safety products (i.e., external condoms, lube)
  - Locations:
    - [CVS](#) – 51 Linden St, Waltham, MA 02452 | 781.894.4522
    - [Walgreens](#) – 15 Main St, Waltham, MA 02453 | 781.642.8711
    - [Osco Pharmacy](#) at Star Market – 535 Trapelo Rd, Belmont, MA, 02478 | 617.489.6542 (accessible by campus shuttle)

## Online

### *General Sexual Health*

- [Planned Parenthood](#) – sexual and reproductive health education information
- [The Guttmacher Institute](#) – sexual and reproductive health research and advocacy organization
- [Healthy Sexual](#) – sexual health conversation starts and resources to find local STI testing sites and LGBTQ friendly medical providers
- [Go Ask Alice](#) – honest answers to sexual health questions and other health topics run by Columbia University
- [Scarleteen](#) – sexual health, relationship, and sexual identity-based information geared toward teen and young adult audiences
- [The Kinsey Institute](#) – an Indiana based research agency that conducts outreach, historical preservation and provides educational materials focused human sexuality and sexual health
- [The American Sexual Health Association](#) – an educational resource for sexual health care, reproductive health, sexual anatomy, and discussing sexual pleasure
- [Centers for Disease Control and Prevention](#) (CDC) – educational information, resources, and statistics on sexual health behaviors, STIs, reproductive health and more
- [American College Health Association](#) – national college health organization that conducts studies on the health behaviors of college students and the sexual health services available on campuses across the United States

### *LGBTQIA+ Specific Sexual Health*

- [Bisexual Resource Center](#) – provides information and support on sexual health care, bisexual, and other intersectional identities, and offers Boston based social engagements
- [Trans Student Educational Resources](#) – a national organization run by transgender youth that helps to educate, advocate, and empower trans and gender nonconforming students.
- [The Asexual Visibility and Education Network](#) – offers online community forums and resources about asexuality
- Sexual Decision Making
- [Options for Sexual Health](#) – Questions and motivations to ask yourself before engaging in sexual activity
- [Scarleteen – Ready or Not?](#) – A helpful checklist of what to consider before having any form of sex

### *Sexually Transmitted Infections (STIs)*

- [Bentley Health Center](#) – make an appointment with the health center for express STI testing, it takes 15 minutes, and the providers can help you identify whether a urine and or blood test is best for you.
- [Get Yourself Tested](#) – Resources on when, where, and why you should get tested for STIs
- [STI Testing Process](#) – an overview of what the STI testing process looks like and how to communicate with your partner about STI testing

### *Sexual Pleasure*

- [Dangerous Lily](#) - for sex toy reviews and cleaning/ care guides
- [The Pleasure Project](#) - library of resources on pleasure across several topics

### *HIV/AIDS*

- [HIV.gov](#) –where to get an HIV test and educational information and supportive resources about living with HIV
- [UNAIDS](#) – Global HIV & AIDS statistics and fact sheet
- [PrEP and PEP](#) – educational resources and how to talk about PrEP and PEP with your sexual partners

### *Contraception/Birth Control*

- [Bedsider](#) – provides information on sexual healthcare, contraceptive methods, birth control reminder apps and more.
- [CDC](#) – provides information on different contraceptive methods

### *Relationship and Sexual Violence Support*

- [Bentley University](#) – resources for survivors and allies, University reporting options, on-campus support and how to get involved in prevention efforts on-campus
- [One Love Foundation](#) – educational resources on healthy relationships vs. unhealthy relationships, and interpersonal violence prevention resources
- [Rape, Abuse & Incest National Network \(RAINN\)](#) – educational resources on sexual violence, links to national hotlines and resources on how to help survivors of interpersonal violence

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